2011 MONTHLY PREMIUMS FOR COBRA MEMBERS

CHOICE PPO PLAN (80/20)

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	Total Premium
Single	\$437.58 (\$429.00 + \$8.58)
Family	\$1241.34 (\$1217.00 + \$24.34)

2010 Rates
Total Premium
\$311.10
\$856.80

CHOICE PLUS PLAN (90/10)

	Total Premium
Single	\$778.26 (\$763.00 + \$15.26)
Family	\$1855.38 (\$1819.00 + \$36.38)

COPAY CHOICE PLAN

	Total Premium
Single	\$489.60 (\$480.00 + \$9.60)
Family	\$1418.82 (\$1391.00 + \$27.82)

Total Premium
\$362.10
\$1,020.00

BASIC CHOICE PLAN (50/50)

	Total Premium
Single	\$375.36 (\$368.00 + \$7.36)
Family	\$1021.02 (\$1001.00 + \$20.02)

Total Premium
\$279.99
\$685.44

DENTAL CHOICE PLAN

	Total Premium
Single	\$96.90 (\$95.00 + \$1.90)
Family	\$173.40 (\$170.00 + \$3.40)

Total Premium
\$96.90
\$173.40

DENTAL CHOICE PLUS PLAN

	Total Premium
Single	\$112.20 (\$110.00 + \$2.20)
Family	\$255.00 (\$250.00 + \$5.00)

Total Premium
\$112.20
\$255.00

PREVENTATIVE CHOICE PLAN

	Total Premium
Single	\$87.21 (\$85.50 + \$1.71)
Family	\$144.84 (\$142.00 + \$2.84)

Total Premium	
\$87.21	
\$144.84	

BASIC VISION PLAN

	Total Premium
Single	\$4.96 (\$4.86 + \$.10)
Family	\$13.69 (\$13.42 + \$.27)

Total Premium
\$4.96
\$13.69

VISION PLUS PLAN

	Total Premium
Single	\$8.47 (\$8.30 + \$.17)
Family	\$23.34 (\$22.88 + \$.46)

Total Premium	
\$8.47	
\$23.34	